been passed by both Houses of Parliament.

Health Facilities in Rural Areas of Gujarat

2905. SHRI KANAKSINH MOHANSINH MAGROLA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the health of common man in rural areas of Gujarat State is not deteriorations much more in comparison to other States;

(b) what percentage of rural population is not actually getting the benefits of the Public Health Centres;

(c) what percentage of the budget of public Health Centres is spent on medicines for the patients; and

(d) what are the details of State-wise budget and whether Government of India proposes of start some special ambitious schemes for health care on priority basis for Gujarat, if so, by when, and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HELTH AND FAMILY WELFARE (DR. C. SILEVERA): (a) No, Sir.

(b) A substantially large percentage of rural population is benefitted by the Primary Health Centres.

(c) As per the information received from the State Govt., about 15.8% of the budget of Primary Health Centres is spent on medicines.

(d) The State-wise allocation for the year 1994-95 under the minimum Needs Programmes which includes provision for Primary Health Centres is given in the enclosed Statement. (*See* below) There is no proposal to start a new scheme for health care in Gujarat only.

Statement

Allocation Under Minimum Needs Programme for health

(Rs. in lakhs)

(1994-95)

Sl.No. State/UT	Approved Outlay
1. Andhra Pradesh	800.00
2. Arunachal Pradesh	346.05
3. Assam	1890.00
4. Bihar	2700.00
5. Goa	232.00
6. Gujarat	1718.00
7. Haryana	900.00
8. Himachal Pradesh	1257.00
9. J & K	1662.00
10. Karnataka	3438.00
11. Kerala	506.00
12. Madhya Pradesh	3350.00
13. Maharashtra	3566.00
14. Manipur	225.00
15. Meghalaya	500.00
16. Mizoram	328.00
17. Nagaland	175.00
18. Orissa	1489.47
19. Punjab	1000.00
20. Rajasthan	2950.00
21. Sikkim	250.00
22. Tamil Nadu	2679.00
23. Tripura	450.00
24. Uttar Pradesh	4295.00
25. West Bengal	1107.00
26. A&N Islands	372.00
27. Chandigarh	90.00
28. D&N Haveli	38.00
29. Daman & Diu	45.00
30. Delhi	—
31. Lakshadweep	48.32
32. Pondicherry	211.00
Total States & UTs	38617.84

Propagation of an Ayurvedic Medicine to cure AIDS

2906. SHRI S.S. AHLUWALIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that in his deliberations in the 12th Annual Convention of the Association of American Physicians from India (AAPI) had earlier this month in Altanta, U.S.A., he disagreed to accept the prevailing incidents of AIDS cases in India to be alarming enough;

(b) whether Government have comprehended any specific minimum level beyond which it would be considered to be alarming and/or epidemic;

(c) whether it is also a fact that the Hon'ble Minister also availed the Forum abroad to plead for a particular Ayurveda practitioner of Karnataka in order to promote his medicine which is said to provide relief to AIDS patients;

(d) whether it is a fact that the said medicine developed by the Ayurveda practitioner has been duly approved by the statutory authorities and recognised for use for treatment of AIDS patients in the Hospitals; and

(e) if not, the basis of the Hon'ble Minister's propagating a particular individual?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) to (e) While addressing the annual convention of the American Association of Physicians from India, the Union Minister of Health and Family Welfare drew attention to the relatively smaller number of reported AIDS cases in the country and pleaded for avoidance of panic reactions on the basis of guesstimates about the total incidence of AIDS. He also commended the search for cure from AIDS which is going on around the world and mentioned in this respect the promising possibilities in indigenous systems of medicine. The reference to the clinical trials with an Ayurvedic drug was made in this context.

Immunisation against Rabies

2907. SHRI S.S. AHLUWALIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that a large number of people in the country continue to fall victims to rabies due to dog bite every year;

(b) if so, the annual average of deaths occurred due to rabies during the last five years;

(c) whether it is a fact that the traditional nervous tissue vaccine injected free of cost for anti-rabies treatment in the hospitals has numerous side effects and has become obsolete, particularly in the wake of introduction of more effective anti-rabies serum and vaccines, marketed by multi-national drug companies;

(d) whether it is a fact that such anti-rabies serums are expensive and beyond the reach of the common man;

(e) if so, whether Government have taken any action for development of efficient anti-rabies vaccine indigenously;

(f) whether it is also a fact that, instead of immunisation of human beings with anti-rabies serums/vaccines, which involve higher cost, World Health Organisation has decided to introduce administration of anti-rabies vaccines for the stray dogs through baits to prevent infection; if so, details thereof; and

(g) Action plan of Government, if any for implementation of the said WHO programme in the country?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) Yes, Sir.

(b) It is estimated that in our country about 25,000 people die every year due to rabies.

(c) and (d) The side effects of the nervous tissue vaccine is reported in one